

PROCEDURE REFERENCE : FmHA Instruction 2045-GG.

PURPOSE : Proposing to Remove, Reduce in Grade or
Pay or Suspension for more than 14 Days.

UNITED STATES DEPARTMENT OF AGRICULTURE
FARMERS HOME ADMINISTRATION
(Location)

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

FOR OFFICIAL USE ONLY

Mr. _____
County Supervisor
Farmers Home Administration
Anywhere, Anystate 00000

Dear Mr. _____:

This is a notice of a proposal to (remove, reduce in grade or pay, or suspend you for more than 14 days) you from your position with Farmers Home Administration (FmHA) not earlier than 30 calendar days from the date of your receipt of this notice. This action is being proposed in order to promote the efficiency of the service. The reason(s) supporting this proposed action are as follows:

REASON I - SOLICITATION OF FAVORS AND RECEIVING MONETARY
VALUE FOR PERSONAL GAIN

SPECIFICATION I: In your October 9, 199_, sworn signed statement to OIG Special Agent _____, you stated that on or about March 198_, you contacted FmHA borrower _____, and told him you were having financial problems. You asked him if he would sign two Forms FmHA 440-4, "Security Agreements," and FmHA 431-2, "Farm and Home Plan," in order for you to secure funds from two FmHA Operating Loans. One loan was for \$50,000 and the other was for \$40,000 for a total of \$90,000. These loans were processed in the name of _____, but you admitted receiving the money

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for your own personal gain. Mr. _____, in his sworn signed statement to OIG Special Agent _____, confirmed the fact that you approached him and solicited his participation in the processing of false loan dockets. Completed Form FmHA 431-2, "Farm and Home Plan," and Forms FmHA 440-4, "Security Agreements," support the fact that you did in fact solicit and process these forms in order to obtain Government money for your own personal gain. These actions constitute solicitation for personal gain and are in violation of FmHA Instruction 2045-BR Exhibit A, Part 735-12(a).

(Note: Continue with the same format for additional Specifications and/or Reasons as required.)

Enclosed are copies of the material listed below which I have relied on to support the reasons in this notice (list the material enclosed). If you do not fully understand the reasons why your (name the action) is proposed, please contact me for further explanation.

You may answer these charges personally or in writing, or both personally and in writing, to _____, Deputy Administrator for Management, FmHA, USDA, Room 5007, South Agriculture Bldg., Washington, D.C. 20250. You may also submit affidavits or such other evidence that you wish to have considered in support of your answer. If you wish to answer personally, you must request a personal conference either in your written answer or separately. Your request for a personal conference should be sent to Deputy Administrator _____, address above, and you will be notified of the arrangements. It is preferable that you submit a detailed written answer prior to the holding of a personal conference; however, this is not required. Full consideration will be given to your written answer and/or personal conference and any evidence you submit to support your answer. You have the right to be accompanied, represented, and advised by an attorney or other representative of your choice at any time during this proceeding.*

You will be allowed seven (7) calendar days from the date of your receipt of this notice to submit your answer. If you need additional time you must submit a written request stating your reasons to Deputy Administrator _____, at the above address, or call the Chief, Employee Relations Branch, in the National Office, telephone FTS 245-5500, (for commercial add area code 202).

You will be allowed up to _____ hours of official time for reviewing the enclosed material relied on to support the reasons in this notice; for preparing a written reply; for obtaining

Mr. _____

affidavits and for making an oral reply.** You should arrange with your supervisor, Mr. _____, for the use of official time. Considerations will be given to extending the number of hours of official time if you submit a written request to me stating your reasons for desiring more time.

As soon as possible after your answer is received or after expiration of the seven (7) day limit if you do not answer, a written decision will be issued to you.

No adverse action will be taken under this notice until after the expiration of thirty (30) calendar days following the date you receive this notice. You will be kept in an active duty status pending a decision in this matter.

Experience has indicated that, at times, work-related problems can be the result of personal situations. While this may not be the case, it may be helpful to consider all the factors contributing to your conduct problems and that you take appropriate action to deal with them. The Employee Assistance Program Coordinator for this State is (name) and he/she is available to help you assess any problems you may have and to direct you to the appropriate counseling source. You may contact the Program Coordinator on _____. If you prefer, you can contact the FmHA Employee Assistance Program Help-Line on 1-800-233-0040. All information you provide is strictly confidential. I urge you to consider seeking such assistance.

Sincerely,

(Name)
STATE DIRECTOR

Enclosures

* If the State has an exclusive representative (Union) and the employee is included in the bargaining unit be certain to review the labor agreement. Ascertain whether the agreement contains additional requirements, i.e., advise the employee of his/her right to union representation, identify the union steward; furnish two copies of the proposal, etc.

** The number of hours allowed should be based on the amount of material the employee needs to review and should be reasonable. The usual amount of time is 8 to 24 hours, pending on the volume of material to be reviewed, etc.

Mr. _____

REFERENCE: FPM Chapter 752, Subchapter 3
DPM Chapter 752, Subchapter 2
Part 752, Title 5, Code of Federal Regulations
FmHA Instruction 2045-GG with Exhibit A

NOTE: The above are ready references for the Administrative Sections' use and need not be listed on the letters going to the employee unless you believe it will be useful information.